

up-to-date editorial and Association news, and regard the action of the California Medical Association as furnishing me another source of information which will be both interesting and valuable.

Again thanking you, I am

Very truly yours,

WILLIAM G. BONELLI, *Director*.

Concerning Federal (United States Public Health) regulations on psittacosis (interstate shipment of psittacine birds from California).*

COPY

UNITED STATES PUBLIC HEALTH SERVICE

USPHS No. 0425—General (Psittacosis).

X 1950—California Bird Breeders' Association.

July 30, 1936.

Mr. Gilbert C. Lee, President Emeritus
Southern California Bird Breeders' Association
Room 200, 110 Center
Los Angeles, California.

Sir:—This office is in receipt of your letter of July 24, requesting, on behalf of the California Bird Breeders' Association, that Section 15½, Interstate Quarantine Regulations, governing the interstate transportation of psittacine birds, be rescinded.

With respect to your statement that no state other than California has complied with the law in regard to the laboratory examination of birds, your attention is invited to language of Section 15½ of the Interstate Quarantine Regulations relating to the certification of interstate shipments, which requires that inspections of bird-breeding establishments shall be supplemented by "such laboratory examinations of birds . . . as may be deemed necessary to enable the certifying authority to determine that the birds offered for shipment are free from psittacosis infection." While the Public Health Service has received no specific information which would indicate that the health authorities of states other than California are not making laboratory examinations of birds in connection with the certification of interstate shipments, it may be pointed out that the regulations do not *require* such examination in every instance, but leave to the discretion of the state health authority determination as to whether laboratory examination of birds may be necessary. It has been expected that each state health officer would be guided in this respect, to a considerable extent, but the history of the establishment in relation to the presence or absence of psittacosis infection in the past. In this connection it may be stated that within the past few years the only outbreaks of human psittacosis traceable to parakeets shipped in interstate commerce were directly attributable to infected stock originating in California. There has been no evidence to indicate that the infection is present in any other state.

The Interstate Quarantine Regulations place upon the bird-breeding establishments and the transportation companies the responsibility of seeing that the requirement with respect to the age of birds that may be shipped in

interstate commerce be observed. If you will furnish this office with the names and addresses of bird breeders and the names of the transportation companies who have violated the regulations by shipping or accepting for shipment birds under the age limit specified, I shall be very glad to initiate at once an investigation of this matter and to refer to the Department of Justice any violations of the regulations which can be proven.

I note your statement that Section 15½ of the Interstate Quarantine Regulations works great hardship upon bird breeders by virtue of the fact that the California Department of Public Health has taken 20 per cent of the birds of each breeder for laboratory examination. As this office has repeatedly pointed out to your Association, the promulgation of Section 15½ of the Interstate Quarantine Regulations, with the rigid requirements and activities of the California Department of Public Health directed toward cleaning up psittacosis in California, probably saved the bird-breeding industry in your state. At the time the latest amendment to the regulations was promulgated and the State Department of Public Health adopted its present procedure in connection with certification, a number of states were demanding that the Public Health Service set up an embargo against *all* interstate shipments of psittacine birds, and were considering the establishment of individual state embargoes against such shipments. It is my belief that if the bird breeders of California are wise they not only will refrain from complaining of the restrictions which have been placed upon the breeding and shipping of parakeets and other psittacine birds, but accept the activity of the State Department of Public Health as being one of the most helpful things that could be done for the industry, and give their fullest cooperation in meeting the requirements which, after all, have been set up for the protection of the industry as well as the public. The Public Health Service has full confidence in the activities of the State Department of Public Health directed toward keeping infected birds out of interstate traffic. That the effort toward this end has been effective is indicated by the fact that no outbreak of human psittacosis has been reported outside of California since the State Department of Public Health adopted its new procedure. It is believed that the recent history of psittacosis in California and in other states where fatal outbreaks of the disease were directly traceable to infected birds from California fully warrant the procedure adopted by the State Department of Public Health in connection with the certification of interstate shipments.

While it is regrettable that psittacosis infection in avia-ries in California has made it necessary to impose certain restrictions on interstate shipments for the protection of the public, and it is realized that the application of these restrictions has worked a hardship upon the bird breeders, one must not lose sight of the public's right to be protected from the hazard of illness and possible loss of life. I do not consider it advisable to recommend the rescinding of Section 15½ of the Interstate Quarantine Regulations at this time.

Very truly yours,

(Signed) THOMAS PARRAN,
Surgeon-General.

cc: to Dr. W. M. Dickie,
Director, California State Board of Health.

* References to articles in CALIFORNIA AND WESTERN MEDICINE on the subject of psittacosis include:

States Ban Parakeet Shipments, Vol. XL, No. 3 March, 1934, page 212, Miscellany.

U. S. Interstate Quarantine Regulations Amended, Vol. XL, No. 4, April, 1934, page 313. Filler.

Vol. XL, No. 4, April, 1934, advertising page 29. Filler.

Psittacosis, Vol. XL, No. 5, May, 1934, page 380. Editorial.

Psittacosis—James B. Luckie, Vol. 41, No. 2, August, 1934, page 98. Original article.

Psittacosis in Germany and Holland in 1935—Karl Meyer, Vol. 41, No. 2, August, 1934, page 133. Editorial Comment.

Psittacosis in California, Vol. 43, No. 4, October, 1935, page 253. Editorial.

Psittacosis—Arthur B. Steele, Vol. 43, No. 4, October, 1935, page 257. Original article.

Psittacosis in Australia—K. F. Meyer, Vol. 43, No. 4, October, 1935, page 260. Original article.

Psittacosis and Tularemia, Vol. 44, No. 2, February, 1936, page 79. Original article.

Concerning "abortion racket."

BOARD OF MEDICAL EXAMINERS
STATE OF CALIFORNIA

San Francisco, August 3, 1936.

To the Editor:—Referring to the clipping from the Los Angeles Times of July 27, 1936, commenting on what we term the Pacific Coast abortion racket, wherein is related that "Los Angeles politicians has guaranteed 'arrest protection' to the operators of illegal surgery clinics. . . . It is reported that at a price of several thousand dollars a month they had arranged to 'fix' not only police and officers of the State Medical Board, but members of the District Attorney's office as well."

This article strikes us as a smoke screen in an endeavor to discredit the Board of Medical Examiners.

The so-called abortion racket of Pacific Coast magnitude has been under investigation by the Board of Medical Examiners, through its executive officer, for the past two years. We have communicated the facts to the District Attorneys' offices of the counties of Alameda, Los Angeles, and San Francisco.

The promoters became rather firmly entrenched. Offices have been maintained in Seattle, Portland, San Francisco, Oakland, San Jose, Los Angeles, Hollywood, and San Diego. The denouement came early in June this year in the form of a San Francisco grand jury indictment of some thirty-one individuals, said to be connected with this ring, whose names were printed in *CALIFORNIA AND WESTERN MEDICINE* (News Items), July, 1936, page 112. Then followed a raid made by Assistant District Attorney McMahon of San Francisco County, accompanied by police officers of the San Francisco Homicide Squad, when office records, equipment, etc., were seized in San Francisco and Oakland. They then journeyed to Los Angeles, where, accompanied by a representative of the District Attorney's office, offices were raided, and within the past two weeks offices in San Diego have been raided.

Practically all of the indicted individuals have been arraigned in the San Francisco courts, and we understand the trial is set in the Superior Court of San Francisco for early in October.

Under date of July 13, 1936, the Los Angeles District Attorney advised that he had been informed the local police department intended within a week or two to submit evidence to the Los Angeles County grand jury.

It is a matter of common rumor that the asserted promoter of this ring has openly boasted of his "protection." Before the curtain finally falls we anticipate that his boasts will be proven false.

The latest rumor is that endeavors will be made by the defense to have continuances granted from time to time in hopes that when the trial is finally held important witnesses will have "disappeared."

In so far as the Board of Medical Examiners is concerned, rest assured that no "protection" can be obtained at any price by those engaged in violation of law. Our board, individually and collectively, has always endeavored to perpetuate those high ideals which have marked the ethical practice of medicine in America, as well as to enforce the provisions of the Medical Practice Act. True, we have occasionally found that the Board has been "sold out" by some unscrupulous employee, but as soon as the discovery is made, no time has been wasted in ousting such employee.

The interest of the Board of Medical Examiners will continue in the active prosecution of the so-called Pacific Coast abortion ring until its final determination in the courts. We have had most commendable support from District Attorney Matthew Brady and his assistant, Mr. McMahon, of San Francisco, which promises to result in the complete eradication of this organized racket.

Very truly yours,

C. B. PINKHAM, M.D.,
Secretary-Treasurer.

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SURGERY RING TO BE PROBED

Charges that a syndicate of Los Angeles politicians has guaranteed "arrest protection" to the operators of illegal surgery clinics are to be investigated next week by the county grand jury.

Plans for the jury inquiry were disclosed by police and District Attorney's aids when it was learned that a group of surgeons, asserted members of a state-wide illegal operation "ring," had undertaken to renew activities in Los Angeles after having been driven out of business several months ago.

Reopening offices in a downtown building, which they had hurriedly evacuated upon the threat of police raids, the surgeons boasted to prospective patients, it was reported, that, at a price of several thousand dollars a month, they had arranged to "fix" not only police and officials of the State Medical Board, but members of the District Attorney's office as well. — *Los Angeles Times*, July 27, 1936.

SPECIAL ARTICLES

THE AMERICAN BOARD OF INTERNAL MEDICINE, INC.

The American Board of Internal Medicine, Incorporated, February 28, 1936, completed its organization on June 15, 1936. The officers chosen were: Walter L. Biering of Des Moines, chairman; Jonathan C. Meakins of Montreal, vice-chairman; and O. H. Perry Pepper of Philadelphia, secretary-treasurer. These officers, with the following six members, constitute the present membership of the Board: David P. Barr of St. Louis, Reginald Fitz of Boston, Ernest E. Irons of Chicago, William S. Middleton of Madison, John H. Musser of New Orleans, and G. Gill Richards of Salt Lake City.

The term of office of each member will be three years, and no member can serve more than two consecutive three-year terms.

The organization of the Board is the result of effective effort on the part of the American College of Physicians in conjunction with the Section on Practice of Medicine of the American Medical Association, and these two organizations are represented in the membership of the Board on a five to four ratio, respectively.

The American Board of Internal Medicine had previously received the official approval of the two bodies fostering its organization, as well as that of the Advisory Board for Medical Specialties and the Council on Medical Education and Hospitals of the American Medical Association.

The purpose of the Board will be the certification of specialists in the field of internal medicine, and the establishment of qualifications with the required examination procedure for such certification.

While the Board is at present chiefly concerned with the qualification and procedure for certification in the general field of internal medicine, it is intended to inaugurate immediately after July 1, 1937, similar qualification and procedure for additional certification in certain of the more restricted and specialized branches of internal medicine, as gastro-enterology, cardiology, metabolic diseases, tuberculosis, allergic diseases, etc. Such special certification will be considered only for candidates who have passed at least the written examination required for certification in general internal medicine. The operation of such a plan will require the active participation and cooperation of recognized representatives from each of such special fields of medicine.

Each applicant for admission to the examination in internal medicine will be required to meet the following standards:

General Qualifications

1. Satisfactory moral and ethical standing in the profession.
2. Membership in the American Medical Association or, by courtesy, membership in such Canadian or other medical societies as are recognized for this purpose by the Council on Medical Education and Hospitals of the American Medical Association. Except as here provided, membership in other societies will not be required.

Professional Standing

1. Graduation from a medical school of the United States or Canada recognized by the Council on Medical Education and Hospitals of the American Medical Association.
2. Completion of an internship of not less than one year in a hospital approved by the same council.
3. In the case of an applicant whose training has been received outside of the United States and Canada, his credentials must be satisfactory to the Advisory Board for Medical Specialties and the Council on Medical Education and Hospitals of the American Medical Association.

Special Training

1. Five years must elapse after completion of a year's internship in a hospital approved for interne training before the candidate is eligible for examination.